

### **COP23 Presentation Meeting**

Mozambique

April 25, 2023

### Agenda

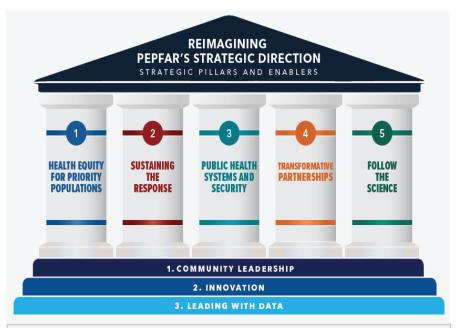
- Introductions and Opening Remarks 10 mins
  - U.S. Ambassador
  - Government of Mozambique (GRM)
  - Civil Society
- PEPFAR/Mozambique Presentation on the COP23 Vision 20 mins
- Stakeholder Discussion and Concurrence 10 mins
- Remarks from OGAC Leadership 10 mins



## State of the Epidemic and the Road to 95 95 95



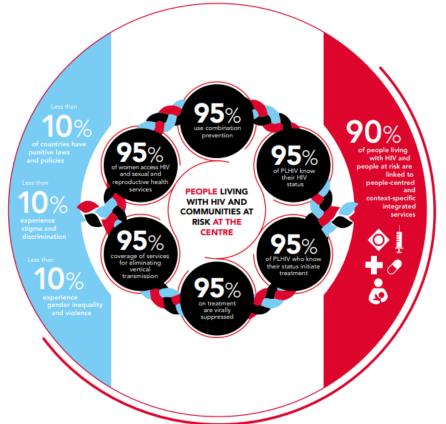
### One Country, One Program: Aligning Priorities and Vision



#### PROGRAM GOALS:

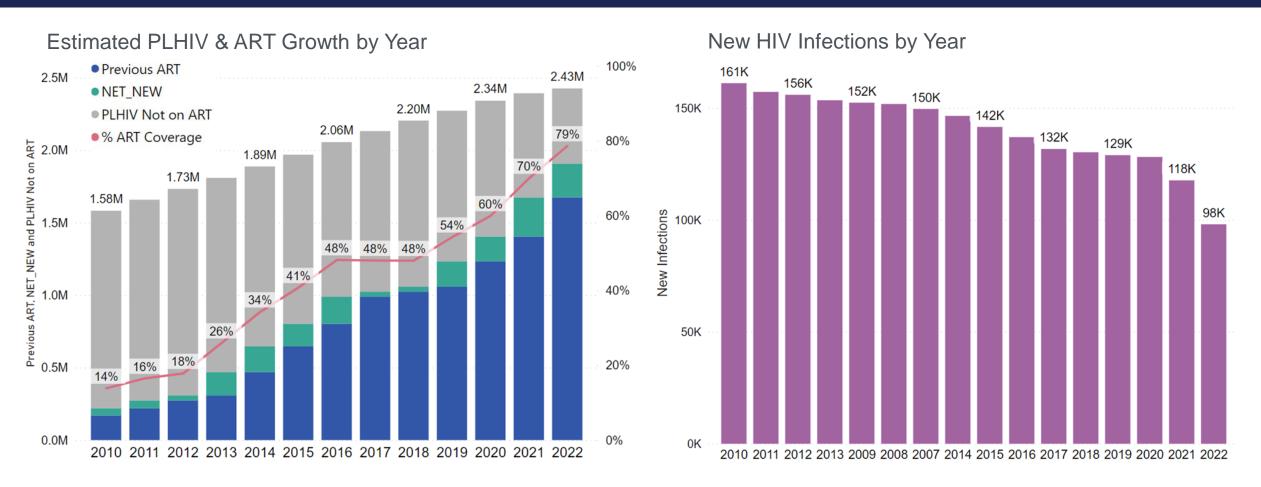
- 1. Reach global 95-95-95 treatment targets for all ages, genders, and population groups.
- Reduce new HIV infections dramatically through effective prevention and treatment, in support of UNAIDS targets.
- Close equity gaps for priority populations, including adolescent girls and young women, key populations, and children.
- Transform the PEPFAR program towards sustaining HIV impact and long-term sustainability by strengthening the capabilities of governments to lead and manage the program, in collaboration with communities, the private sector, and local partners.
- Make measurable and sustainable gains in partner country public health systems and health security to strengthen public health prevention, data, and response capabilities for HIV and other health threats.

### **2025 AIDS TARGETS**





### **Progress Over the Last Decade Shows Dramatic Gains**

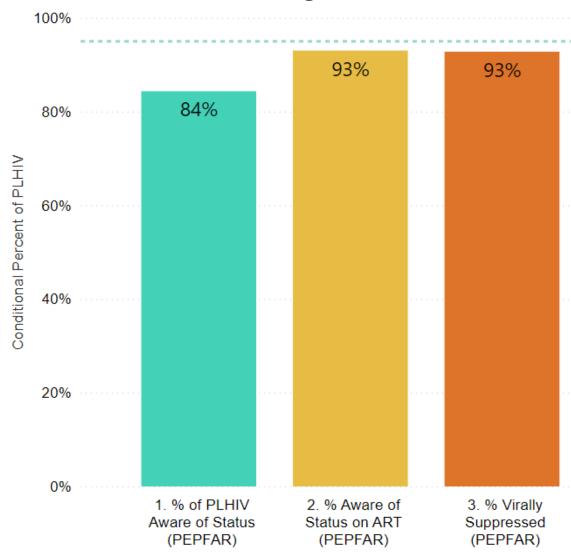


- As of December 2022, 79% of Mozambique's PLHIV are on ART (9% increase from December 2021)
- Between 2019 and 2022, 850K net PLHIV joined the treatment cohort, possibly contributing to the roughly 24% decline in estimated new infections between 2021 and 2022

<sup>\*</sup> New Infections and PLHIV Estimates from UNAIDS Spectrum/NAOMI 2023 Estimates; \* ART Coverage and VLS triangulated with DATIM reported TX\_CURR & Viral Load Suppression 2023Q1

### Mozambique Estimated to be at 84-93-93 at FY23 Q1

#### FY23 Q1 Estimated Progress Towards 95-95-95

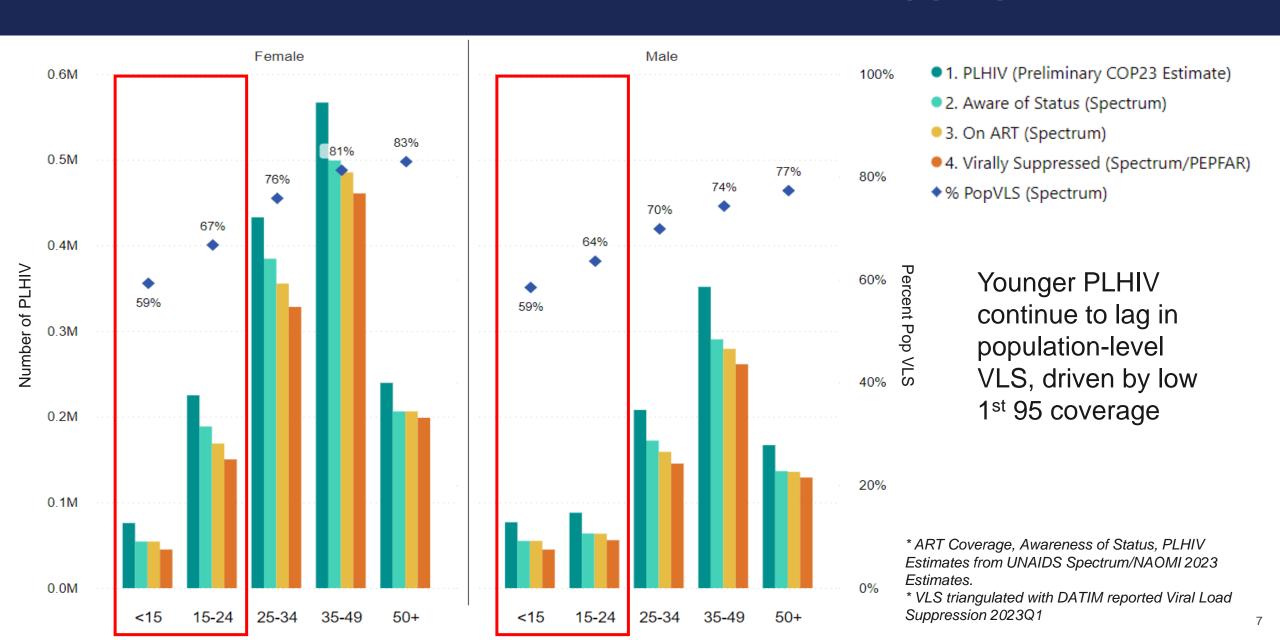


- Overall FY23 Q1 cascade 84-93-93
  - Population-level ART Coverage: 78%
  - Population-level VLS (pop VLS): 73%
- Population-level VLS lags for the following populations, largely due to the 1<sup>st</sup> 95:
  - Men
  - Children/adolescents
  - PLHIV in north and central provinces
- Recent treatment program growth has been fastest in populations and places where we are farthest behind

<sup>\*</sup> Awareness of Status and PLHIV Estimates from UNAIDS Spectrum/NAOMI 2023 Estimates

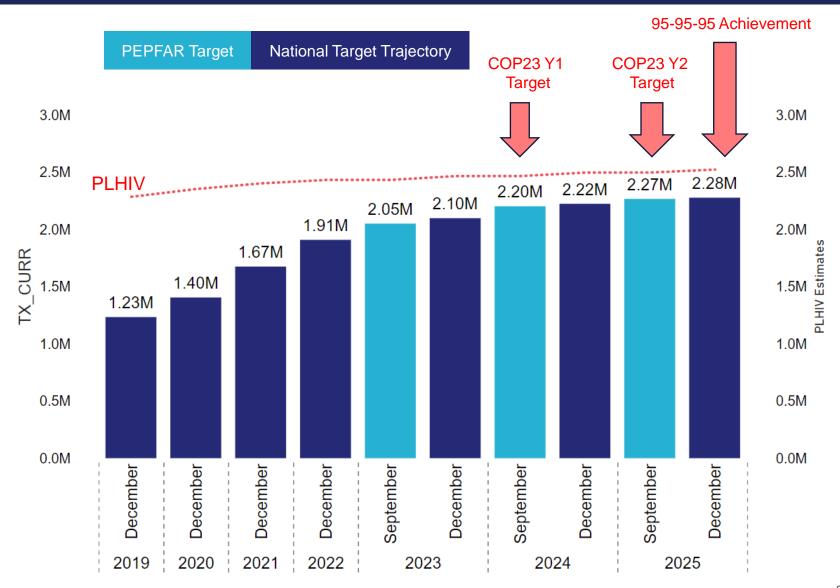
<sup>\*</sup> ART Coverage and VLS triangulated with DATIM reported TX\_CURR & Viral Load Suppression 2023Q1

### Men, Children and Adolescents Are Still Lagging Behind



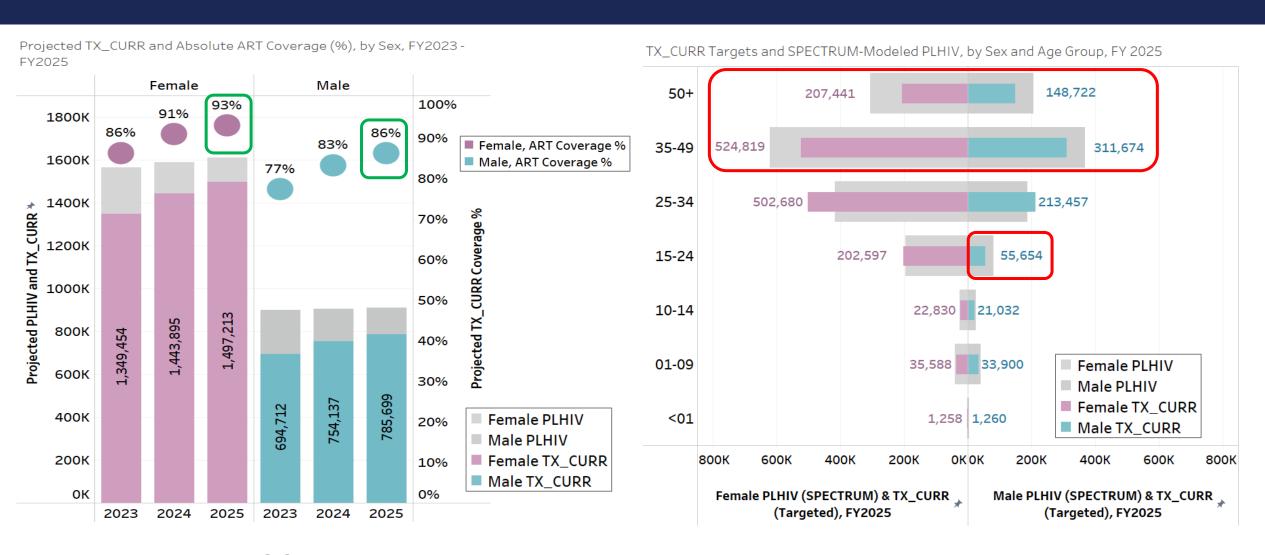
### Mozambique Plans to Achieve 95-95-95 by December 2025

- PEPFAR targets are designed to align with MISAU's ambitious goal of achieving 95-95-95 by December 2025 (~90% ART coverage)
- Trajectory anticipates progressive slowing of ART growth nationally





### Projected FY25 ART Coverage by Age and Sex



Using our two-year COP23 targets as a guide, gaps in ART coverage in Mozambique beyond FY25 will likely remain limited to young men aged 15-24, and adults aged 35+

### ART Coverage and NET\_NEW Trends by Province

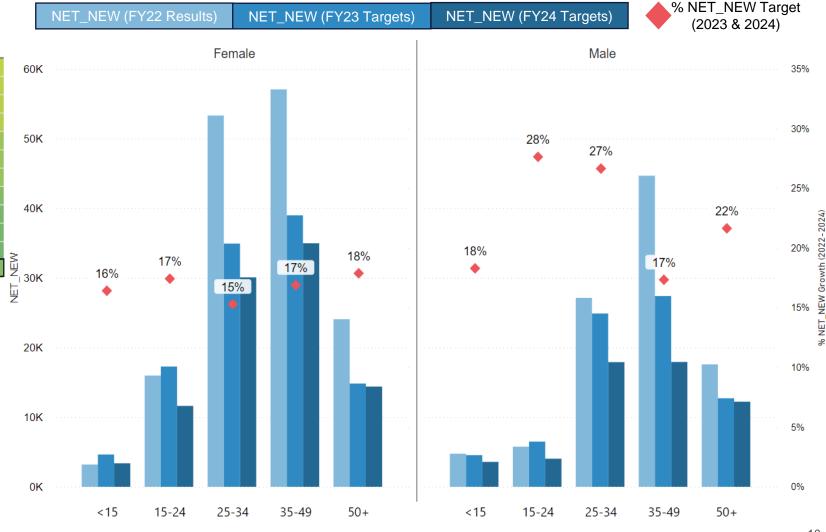
#### **ART Coverage Trend by Province**

Province	% ART Coverage (FY22)	% ART Coverage (FY23)	% ART Coverage (FY24)
Niassa	62%	71%	81%
Cabo Delgado	60%	71%	82%
Sofala	69%	76%	82%
Nampula	67%	75%	82%
Inhambane	72%	79%	85%
Tete	74%	81%	85%
Cidade De Maputo	76%	81%	86%
Manica	80%	85%	88%
Zambezia	80%	85%	90%
Maputo	79%	85%	92%
Gaza	86%	89%	93%
National	76%	82%	88%

<sup>\*</sup>Based on draft Spectrum estimated PLHIV for 2024

- All provinces set for >81% ART coverage by FY24; Provinces with the largest gaps allocated largest growth expectations
- Age bands with lower estimated ART coverage are targeted for higher percentage growth (e.g. ABYM)

#### TX\_NET\_NEW Trends by Age and Sex



### Other Targets to Reach Epidemic Control

FISCAL YEAR	HTS_POS	OVC_SERV	VMMC_CIRC	PrEP_NEW	TB_PREV	AGYW_PREV	KP_PREV
FY21 Results	319,689	648,467	130,312	44,328	391,309	193,543	42,903
FY22 Results	329,853	<b>554,</b> 699	<b>17</b> 2,897	85,768	495,357	258,445	45,847
FY23 Targets	236,019	<b>4</b> 58,787	<b>202,9</b> 93	90,015	337,505	172,057	66,793
FY24 Targets	223,120	441,169	208,472	<b>1</b> 16,632	218,610	172,050	68,528
FY25 Targets	137,891	441,169	230,671	161,398	144,583	172,050	70,241

- HTS\_POS: Anticipated drops in case finding associated with increasing ART coverage
- OVC\_SERV: Increase in OVC comprehensive targets as part of program expansion to Niassa Province; decrease in OVC primary preventive targets for adolescents aged 10-14, designed to complement DREAMS targets for gender parity
- VMMC\_CIRC: Modest target increases aligned with largest provincial gaps to reach and maintain 80% saturation
- PrEP\_NEW: Significant increases in FY24 (30%) and FY25 (38%) targets, aligned to support national targets
- TB\_PREV: Major reduction in TPT targets due to highly successful 'mop-up' campaigns over the past couple of years
- AGYW\_PREV: Maintain target for AGYW, with an increased focus on ABYM with specific interventions
- **KP\_PREV:** Modest increases in FY24 and FY25 targets to support increased coverage among underserved Key Populations

### COP23 Vision to Reach 95-95-95

#### Focus on Equity

Tailor PEPFAR investments based on new population survey data to reach 95-95-95 and reduce new infections, focused on population groups and geographies farthest from epidemic control

- Strengthen, shift and selectively scale existing programming, which is increasingly focused on finding and treating clients in the population groups and geographies farthest from epidemic control
- Increase access to synergistic, combination prevention, in alignment with the National Prevention Roadmap
- Improve QA/QI and site-level mentorship to ensure high quality, person-centered, humanized services
- Strengthen community and facility-based interventions to reduce stigma and discrimination and improve HIV literacy

#### Strengthened Systems

#### Continue to strengthen Mozambique's public health systems

- Strengthen laboratory, HRH, supply chain, and data information systems
- Continue support to Mozambique's MoH (MISAU), National AIDS Council (CNCS), NPHI (INS), and Central Medical Stores (CMAM), and to provincial governments (SPS/DPS)

#### Sustainable Response

#### Build upon strong partnerships for a sustainable long-term response

- Ensure that communities, civil society and PLHIV are increasingly at the center of and driving the response
- Collaborate to build a National Sustainability Roadmap, while concurrently supporting capacity within Mozambique
- Leverage the opportunity of the 2-year COP and 3-year GF grant cycle to ensure complementary programming

### Health Equity for Priority Populations



### COP23 Strategy to Close Equity Gaps for Children

PEPFAR/Mozambique proposes comprehensive HIV prevention measures and a continuum of appropriate care and treatment for mothers and their children, including:

- Prevention of mother-to-child HIV transmission by strengthening retesting for PBFW, enhancing PrEP accessibility, improving EID and consolidating mentor mother (MM) program to improve mother and baby pair HIV outcomes
- Improvements in pediatric case finding through systematic client chart review for missed children, and monthly site-level testing data review, etc
- Improvements in service quality through a focused mentoring package and intensive performance monitoring, aligned with the MISAU's QI guidelines (including Global Alliance Plan/AP3)
- Improvements in retention and viral suppression by linking CLHIV to MM, OVC programs, DSD models, and AHD services for the most ill
- Better CLHIV estimates to guide pediatric case-finding efforts and accurate assessment of coverage along the cascade



### COP23 Strategy to Close Equity Gaps for Adolescents/Youth

PEPFAR/Mozambique is committed to a multi-pronged approach to addressing the unique needs of adolescents and youth, including:

- Accessing the hardest to reach adolescents/youth where they are and facilitating them to determine their HIV status
- Ensuring that adolescents who test negative stay negative and empowering AGYW through combination prevention and DREAMS programming
- Shifting gender norms through strategic engagement with adolescent boys and young men
- Providing adolescent- and youth-friendly health services and peer support to strengthen prevention, decrease interruptions in treatment and improve adherence
- Engaging youth as HIV program co-creators and not just as service beneficiaries



### COP23 Strategy to Close Equity Gaps for Key Populations

PEPFAR/Mozambique recognizes the need to protect the sexual and reproductive health and human rights of key populations by:

- Accessing the hardest to reach KP, including utilization of a socialmedia-based virtual platform, and facilitating them to determine their HIV status in community and facility settings
- Supporting KP who test negative to stay negative
- Understanding KP size estimates and behavioral risk factors through integrated biobehavioral surveys
- Addressing structural barriers via stigma reduction, improved access to legal services and advocacy for more supportive and protective legislation
- Providing KP-friendly health services to decrease interruptions in treatment and improve adherence, including expanded coverage of facilitybased peer navigators, and access to STI screening and treatment
- Building the capacity of KP-led organizations to effectively engage as HIV program co-creators and implementers



### **COP23 Strategy to Close Equity Gaps for Men**

PEPFAR/Mozambique recognizes the need to provide tailored, male-friendly services to close

equity gaps towards 95-95-95 through:

 Improving quality of the male engagement package at all AJUDA sites through national training of HCWs on enhanced communication techniques, expanded use of Male Champions, and improved M&E

- Diagnosing more men living with HIV through male-targeted testing efforts, including HIV self-testing, index case testing and community-based HTS
- Preventing new HIV infections in men through the provision of combination prevention interventions
- Building treatment literacy to reduce stigma among young men
- Maximize existing health-focused communications platform (ALO VIDA) to disseminate targeted text messages to increase the proportion of men accessing and adhering to ART



### **COP23 Strategy for Equitable Combination Prevention**

PEPFAR/Mozambique aims to accelerate the reduction of new HIV infections through synergistic combination prevention programs, aligned with *National Prevention Roadmap*:

- Increased HTS among priority groups (e.g., children, adolescents, youth, men, and KP)
- Strengthened condom and water-based lubricant distribution and service integration, especially for AGYW, youth, and KP
- Support for scale-up of STI screening/treatment for KP and AGYW
- Accelerated PrEP and PEP service expansion, with focus on highincidence areas and sub-populations (AGYW & KP)
- Accelerated VMMC programming to address coverage gaps among men aged 15-29
- Innovative interventions to improve **outreach** to KP, adolescents and youth through **digital media** and **community dialogues**
- National testing/combination prevention campaign for youth



# Strengthening and Sustaining the Response through Transformative Partnerships



### **COP23 Strategy for Health Systems Strengthening**

<u>Vision</u>: Strengthen Mozambique's public health systems, pandemic preparedness, and community-led efforts to sustain long-term HIV impact, which can be leveraged for epidemic surveillance and to deliver sustainable health care for PLHIV and other beneficiaries

- Supporting MISAU and the Mozambique NPHI (INS) for public health preparedness, epidemiology/surveillance and data analysis
- Supporting robust supply chain management and agile sample transport systems to ensure commodity availability and visibility down to the last mile
- Improving laboratory capacity, testing quality, & management systems to ensure scale of HTS, VL, EID, AHD, and testing for other diseases
- Strengthening capacity and sustainability of the HRH workforce and management system, including at the community level
- Supporting minor renovations to improve service delivery quality
- Strengthening data quality and health information systems



### **COP23 Strategy for Community Engagement**

#### PROGRAM DESIGN

- Engagement for COP23 development
- Sharing of quarterly results for discussion and feedback
- Regional consultations with CSOs to inform COP23 Y2
- Triangulation of CLM data with other data sources for program improvement
- Marketing Advisory Group members

#### **CAPACITY BUILDING**

- Support PLASOC-M & National Steering Committee of FBOs executive functions & capacity building
- Institutional capacity building for CBOs
- Technical capacity building for CBOs, FBOs, and village health committees (VHC)







#### PROGRAM IMPLEMENTATION

- Direct community grants for CBOs' innovative health promotion activities
- Sub-grantee recipients for community programs, including outreach, demand creation, and health literacy
- Hiring of >21K CHWs for direct service delivery, of which approximately 4K are peers (MM, AYM, MC, and others)

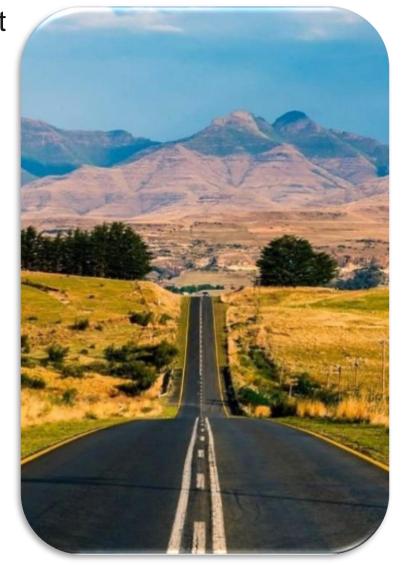
#### **MONITORING/FEEDBACK**

- Support to CLM implementation in 300 health facilities
- Client engagement in QI activities
- Support for health service users' feedback systems
- Strengthen VHC & Humanization Co-Management Committees

### **COP23 Strategy for Program Sustainability**

PEPFAR/Mozambique will continue to work with the Government of Mozambique and other stakeholders to build a shared vision for sustainability of the HIV response, which prioritizes:

- Development of a **sustainability roadmap** that defines a specific set of milestones to transition programs toward increasing local leadership and management of the HIV response
- Promote a government-led national dialogue and provincial consultation workshops on sustainability
- Continued capacity building for local government and affected communities (prioritizing PLHIV- & KP-led organizations) and other stakeholders to assume more responsibility of the HIV response
- Expanded roles for central and provincial government to directly implement key interventions, including through gradually transfer of site, staff and program area responsibility, while continuing to strengthen health systems



### **Transformative Partnership Ensure Coordinated Efforts**

#### **CLIMATE DISASTERS**

- World Bank investments
- USAID's BHA & GHSA portfolio partners
- WHO and UNICEF

#### **GOVERNMENT OF MOZ (GRM)**

- MISAU
- CNCS
- SPS/DPS
- CMAM

- INS
- MGCAS
- MEF
- FADM



Effective Locally-Led HIV Response

#### **CONFLICT SETTINGS**

- IOM for IDP surveillance
- BHA
- WHO and UNICEF
- MSF



#### **LOCAL CIVIL SOCIETY**

- National Youth Council
- Faith-Based Orgs Committee
- CBOs, including PLHIV- and KP-led or -allied orgs

### **Status of Core Standards**



### **Status of PEPFAR COP23 Core Standards**

Fully Met
Mostly Met

Somewhat Met

PEPFAR Core Standards	Rating
1. Offer safe and ethical index testing to all eligible people and expand access to self-testing	
2. Fully implement "test-and-start" policies	
3. Directly and immediately offer HIV prevention services to people at higher risk	
4. Provide OVC and their families with case management and access to socioeconomic interventions in support of HIV prevention and treatment outcomes	
5. Ensure HIV services at PEPFAR-supported sites are free to the public	
6. Eliminate harmful laws, policies, and practices that fuel stigma and discrimination and make consistent progress toward equity	
7. Optimize and standardize ART regimens	
8. Offer differentiated service delivery models	
9. Integrate TB care	

### Status of PEPFAR COP23 Core Standards (cont.)

Fully Met

Mostly Met

Somewhat Met

PEPFAR Core Standards		
10. Diagnose and treat people with advanced HIV disease		
11. Optimize diagnostic networks for VL, EID, TB, and other coinfections		
12. Integrate effective quality assurance and CQI practices into site and program management		
13. Offer treatment and viral load literacy		
14. Enhance local capacity for a sustainable HIV response		
15. Increase partner government leadership		
16. Monitor morbidity and mortality outcome		
17. Adopt and institutionalize best practices for public health case surveillance		



### **COP23: Pivotal Moment Towards 95-95-95**



### COP23 Development Has Been a Collaborative Journey

- In country stakeholder meetings of ~400 people in-person and virtually across USG, GRM, CSOs, IPs and multilateral organizations
- Plenaries/briefing sessions covering the PLL, 5x3 strategy, GRM and CSO priorities, and processes for building/reaching consensus
- Intensive TWG and cross-TWG meetings to discuss program progress, priorities, joint vision and strategy
- National GF Dialogue participation

February

### March

- Pre-Joburg National Directors meeting with CNCS and MISAU leadership
- Johannesburg Co-Planning Meeting
- Stakeholder check in on LIFT Up proposals
- TWG participation in GF grant proposal development process
- Post-Joburg National Directors meeting
- Sharing of draft tools and SDS for stakeholder feedback

- Incorporation of remaining stakeholder feedback into COP tools and slides
- COP23 Virtual Planning/ Stakeholder Meeting
- Continued participation in GF grant proposal development
- Tool check ins and feedback from HQ CAST and iSMEs
- COP23 Approval Meeting

April

### COP23 Budget Addresses Many Stakeholder Priorities

- In COP23, an **overall increased budget envelope** (\$415,995,000 in Year 1) and a flatlined commodities budget facilitated by **synergistic planning for the GF 2023-25 grant** has allowed for **increased funding for stakeholder-identified program and systems priorities**
- Additionally, one time LIFT Up Initiative Funding for \$2.5M was approved on April 18 and will be used to close equity gaps along children, adolescents and KP in FY24 through:
  - Next generation ANC surveillance to improve annual CLHIV estimates
  - Intensified case-finding for <15-year-old biological children of PLHIV on ART</li>
  - Provision of HIV prevention services for HIV-negative PBF adolescents
  - STI screening and treatment scale up for AGYW and KP to reduce HIV transmission and improve service access
  - Expanded support for KP-led and -allied CBOs to address structural barriers
  - A multi-channel virtual platform to reach and link KP to essential services



### Translating Stakeholder Feedback into Programs

#### Area

#### **Identified Need**

### **COP23 Approach**

Combo Prev Offer comprehensive prevention services to affected communities and priority populations in line with the National Prevention Roadmap

- Expand non-index, community-based testing for adolescents, young adults and men, including self-testing
- Expand PrEP targets by 30% (KP, AGYW, & PBF focus)
- Launch combo prevention strategic marketing campaign
- Strengthened condom and lubricant distribution
- Support scale-up of STI screening/Tx for KP and AGYW
- Maintain VMMC programming to address coverage gaps

Adult C&T Address quality of services for male engagement & comorbidities

- Strengthen male engagement package at all AJUDA sites
- Expand male champions from 140 to 179 sites Expand advanced disease package to 66 new sites
- Integrate mental health services into existing psychosocial support interventions and expand to 3-6 sites/prov
- Provide tailored services to military populations, particularly those in conflict zones
- Begin to support stronger NCD-HIV service integration



### Translating Stakeholder Feedback into Programs (cont.)

**Identified Need COP23 Approach** Area Expand facility-based KP peer navigators Expand PrEP/combo prevention for KP beneficiaries Optimize and consolidate OST delivery Expand KP services and build KP Expand capacity-building for KP-led organizations capacity for KP-led organizations Launch community dialogues and digital outreach efforts Conduct KP IBBS • Expand adolescent youth mentors from 140 to 179 sites Expand mentor mothers to serve high-risk HIV- PBF Better serve adolescents & young Peds/ Expand GBV prevention and other services for ABYM adults, and pediatric populations Youth Expand OVC services to Niassa Province that are being left behind Launch community youth centers that provide HTS and other combination prevention services Maintain CLM at 300 sites Expand tailored capacity-building services to more orgs Expand community opportunities Community Reinitiate PCO small grants to direct fund CBOs

**Engage National Youth Council more proactively** 

CS leadership in launch of prevention-focused campaign

**Engagement** 

for leadership in HIV response

### Translating Stakeholder Feedback into Programs (cont.)

## **Identified Need** Area Strengthen public health systems **Systems** to facilitate HIV epidemic control

**COP23 Approach** 

- Support implementation of community health subsystem
- Support pre-service training for the new APS cadre
- Strengthen local capacity for management and implementation of laboratory CQI programs and LIS
- Implement a standardized approach with MISAU to quality assurance of supervision visits at all sites
- Implement joint MISAU and PEPFAR DQAs using standardized tools and methodology
- Conduct surveillance of ANC routine testing for improved Spectrum/Naomi CLHIV modeling
- Fund a CNCS consultant to lead development of a National Sustainability Roadmap
   Launch "Juntos" A JUDA-like model with SPS CDG
- Launch "Juntos" AJUDA-like model with SPS CDG, site graduation pilots, and VMMC program transition
- Increase funding to G2G mechanisms
- Build national/sub-national capacity to manage outsourced services

Develop a plan to ensure long-term impact of national HIV response

### All COP23 Earmarks and Planning Level Letter Directives Met

Agency Trends			
Agency	COP22	COP23	
DOD	\$8,132,128	\$8,346,829	
HHS/CDC	\$181,961,797	\$188,895,880	
HHS/HRSA	\$2,724,110	\$3,484,909	
Peace Corps	\$2,819,697	\$2,819,697	
State	\$3,292,087	\$4,391,432	
USAID	\$205,745,181	\$210,556,253	
TOTAL	\$404,675,000	\$418,495,000	

#### **PLL Directives**

Earmark	COP22	COP23
C&T	\$276,710,879	\$287,705,177
OVC	\$37,160,483	\$37,826,377
GBV	\$5,663,539	\$5,980,857
Water	\$866,000	\$600,000

#### **Initiative Funds**

Initiative	COP22	COP23
<b>Cervical Cancer</b>	\$5,500,000	\$5,500,000
DREAMS	\$35,000,000	\$35,000,000
VMMC	\$22,680,001	\$23,260,980



### On the Right Path By Doing It Together

Mozambique's HIV response has made exceptional gains (84-93-93: Prelim 2023 Spectrum) and epidemic control is targeted by **Dec 2025** 

- Sustainable programming through enhanced engagement of national/provincial government authorities and empowered civil society actors
- Joint national response planning between key stakeholders to ensure a complementary and comprehensive plan for financial/technical support



### **Estamos Juntos!**

